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CONFIRMATION NO. 7593

<b>SERIAL NUMBER</b> 10/522,073	<b>FILING OR 371(c) DATE</b> 07/06/2005 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3771	<b>ATTORNEY DOCKET NO.</b> 0002063USU/2279
<b>APPLICANTS</b> Hasdi Matarasso, Netanya, ISRAEL; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL03/00599 07/22/2003 which claims benefit of 60/397,042 07/22/2002 <b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 27
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> Charles N J Ruggiero Ohlandt Greeley Ruggiero & Perle 10th Floor One Landmark Square Stamford, CT06901-2682				
<b>TITLE</b> RESPIRATORY AID APPARATUS AND METHOD				
<b>FILING FEE RECEIVED</b> 1790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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 3-27.08